## Case 20-15787-CMG Doc 1 Filed 04/23/20 Entered 04/23/20 13:39:21 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: |                                 |   |
|---|---------------------------------|---|
| United States Bankruptcy Court for the:         |                                 |   |
| DISTRICT OF NEW JERSEY                          | _                               |   |
| Case number (if known)                          | _ Chapter you are filing under: |   |
|   | Chapter 7                       |   |
|   | ☐ Chapter 11                    |   |
|   | ☐ Chapter 12                    |   |
|   | ☐ Chapter 13                    | <br>Check if this is an<br>imended filing |

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | Your full name   |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Angelo First name  U. Middle name  Crocco Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years  |  |   |
|     | maiden names.  |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-5134  |   |

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Debtor 1 Angelo U. Crocco Case number (if known)

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|--|---|---|---|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names |   | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)  |  |  |
|  |   | EIN   | EIN   |  |  |
| 5.   | Where you live  | 123 McKinley Avenue   | If Debtor 2 lives at a different address:   |  |  |
|  |   | Number, Street, City, State & ZIP Code  Middlesex   | Number, Street, City, State & ZIP Code  |  |  |
|  |   | County  | County  |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |
| 6.   | Why you are choosing this district to file for bankruptcy | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |  |  |
|  |   |   |   |  |  |

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Page 3 of 54 Document Debtor 1 Case number (if known) Angelo U. Crocco Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

☐ No.

Go to line 12.

Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Case number (if known) Debtor 1 Angelo U. Crocco Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

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Debtor 1 Angelo U. Crocco

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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|         | Angelo U. Crocco   |  |   |  | JITIDEI (it known)   |  |  |
|---------|--|--|---|--|--|--|--|
| Par     | t 6: Answer These Quest  | ions for R   | eporting Purposes   |  |  |  |  |
| 16.     | What kind of debts do you have?  | 16a.   |   | consumer debts? Consumer debts are ersonal, family, or household purpose."   | e defined in 11 U.S.C. § 101(8) as "incurred by an   |  |  |
|         |  |  | Yes. Go to line 17.   |  |  |  |  |
|         |  | 16b.   | Are your debts primarily  | business debts? Business debts are de  |  |  |  |
|         |  |  | money for a business or investment or through the operation of the business or investment.  □ No. Go to line 16c.   |  |  |  |  |
|         |  |  | ☐ Yes. Go to line 17.   |  |  |  |  |
|         |  | 16c.   | State the type of debts you   | u owe that are not consumer debts or bus   | siness debts   |  |  |
| 17.     | Are you filing under<br>Chapter 7?   | □ No.  | I am not filing under Chapt   | ter 7. Go to line 18.  |  |  |  |
|         | Do you estimate that after any exempt property is excluded and   | ■ Yes.   |   | 7. Do you estimate that after any exempt available to distribute to unsecured credi  | property is excluded and administrative expenses itors?  |  |  |
|         | administrative expenses are paid that funds will be available for distribution to unsecured creditors? |  | ■ No  |  |  |  |  |
|         |  |  | ☐ Yes   |  |  |  |  |
| 18.     | How many Creditors do you estimate that you owe?   | ■ 1-49<br>□ 50-99<br>□ 100-1<br>□ 200-9  |   | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000  |  |  |
| 19.     | How much do you estimate your assets to be worth?  | <b>□</b> \$100,  | 50,000<br>01 - \$100,000<br>001 - \$500,000<br>001 - \$1 million  | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million  | \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion  |  |  |
| 20.     | How much do you estimate your liabilities to be?   | <b>□</b> \$100,  | 50,000<br>101 - \$100,000<br>101 - \$500,000<br>1001 - \$1 million  | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million  | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion  |  |  |
| Par     | t 7: Sign Below  |  |   |  |  |  |  |
| For you |  | If I have United Si If no atto documer I request I underst bankrupt and 3571/s/ Angelo | chosen to file under Chapte rates Code. I understand the rney represents me and I did, I have obtained and read relief in accordance with the rand making a false statemecy case can result in fines unelio U. Crocco U. Crocco e of Debtor 1 | e relief available under each chapter, and d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b) e chapter of title 11, United States Code, ent, concealing property, or obtaining more | gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.  is not an attorney to help me fill out this o).  specified in this petition.  ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |  |

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Debtor 1 Angelo U. Crocco Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Warren      | Brumel, Esq.           | Date          | 4/22/2020              |
|-----------------|------------------------|---------------|------------------------|
| Signature of    | Attorney for Debtor    |               | MM / DD / YYYY         |
| Warren Br       | rumel, Esq.            |               |                        |
| Warren Br       | rumel                  |               |                        |
| Firm name       |                        |               |                        |
| 65 Main St      | treet                  |               |                        |
| PO Box 18       | 31                     |               |                        |
| Keyport, N      | NJ 07735               |               |                        |
| Number, Street, | City, State & ZIP Code |               |                        |
| Contact phone   | 732-264-3400           | Email address | wbrumel@keyportlaw.com |
| 018191980       | ) NJ                   |               |                        |
| Bar number & S  | tate                   |               |                        |

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|                        |                          |                        | 0.51 0 0 0 |                                      |
|------------------------|--------------------------|------------------------|------------|--------------------------------------|
| Fill in this infor     | mation to identify your  | case:                  |            |                                      |
| Debtor 1               | Angelo U. Crocco         | <b>)</b>               |            |                                      |
|                        | First Name               | Middle Name            | Last Name  |                                      |
| Debtor 2               |                          |                        |            |                                      |
| (Spouse if, filing)    | First Name               | Middle Name            | Last Name  | —                                    |
| United States Ba       | ankruptcy Court for the: | DISTRICT OF NEW JERSEY |            |                                      |
| Case number (if known) |                          |                        |            | Chack if this is on                  |
| (II KHOWH)             |                          |                        |            | ☐ Check if this is an amended filing |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa             | rt 1: Summarize Your Assets  |              |                               |
|----------------|--|--------------|-------------------------------|
|                |  | Your a       | ssets<br>of what you own      |
| 1.             | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                          |
|                | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 3,882.62                      |
|                | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 3,882.62                      |
| <sup>o</sup> a | rt 2: Summarize Your Liabilities   |              |                               |
|                |  |              | <b>abilities</b><br>t you owe |
| 2.             | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 0.00                          |
|                | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 0.0                           |
|                | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 93,353.60                     |
|                | Your total liabilities   | \$           | 93,353.66                     |
| Pa             | rt 3: Summarize Your Income and Expenses   |              |                               |
| 1.             | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 1,569.75                      |
| 5.             | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 1,540.00                      |
| Pa             | rt 4: Answer These Questions for Administrative and Statistical Records  |              |                               |
| 6.             | Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                   | ır other sch | nedules.                      |
| ·.             | ■ Yes What kind of debt do you have?   |              |                               |
| •              |  |              |                               |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

the court with your other schedules.

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Debtor 1 Angelo U. Crocco Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

\$\_\_\_\_\_\_2,272.59

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | aim       |
|--|-----------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |           |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$        | 70,807.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 70,807.00 |

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|  |  | Document   | Page 10 of 54   |   |                        |
|--|--|--|---|---|------------------------|
| Fill in this inform  | nation to identify your  | case and this filing:  |   |   |                        |
| Debtor 1   | Angelo U. Crocce   | ^  |   |   |                        |
| Debior 1   | First Name   | Middle Name  | Last Name   | <del></del>                                     |                        |
| Debtor 2   |  |  |   |   |                        |
| (Spouse, if filing)  | First Name   | Middle Name  | Last Name   |   |                        |
| United States Bar  | nkruptcy Court for the:  | DISTRICT OF NEW JERSEY   | •   |   |                        |
|  |  |  |   |   |                        |
| Case number _  |  |  |   |   | ☐ Check if this        |
|  |  |  |   |   | amended fili           |
|  |  |  |   |   |                        |
| Official For   | rm 106A/B  |  |   |   |                        |
| _  |  | ortv   |   |   | 4044                   |
|  | e A/B: Prop  |  |   |   | 12/15                  |
| think it fits best. Be<br>information. If more<br>Answer every quest | e as complete and accura<br>e space is needed, attach<br>tion. | to e items. List an asset only once. ate as possible. If two married per a separate sheet to this form. Or | ople are filing together, both ar<br>n the top of any additional page | e equally responsible for                       | supplying correct      |
| Part 1: Describe B   | Each Residence, Building                                       | g, Land, or Other Real Estate You  | Own or Have an Interest in  |   |                        |
| 1. Do you own or h   | ave any legal or equitabl                                      | e interest in any residence, buildi  | ing, land, or similar property?                                       |   |                        |
| ■ No. Go to Part   | 2.   |  |   |   |                        |
| ☐ Yes. Where is  | the property?  |  |   |   |                        |
|  |  |  |   |   |                        |
|  |  |  |   |   |                        |
| Part 2: Describe   | Your Vehicles  |  |   |   |                        |
| □ No ■ Yes   | iono, il dotoro, oport di                                      | tility vehicles, motorcycles   |   |   |                        |
|  |  |  |   |   |                        |
| 3.1 Make: L  | _exus  | Who has an interest in   | n the property? Check one   | Do not deduct secured<br>the amount of any secu |                        |
| Model:   | ES   | ■ Debtor 1 only  |   | Creditors Who Have Co                           | laims Secured by Prope |
| _  | 1997   | Debtor 2 only  |   | Current value of the                            | Current value of t     |
| Approximate  |  | Debtor 1 and Debtor  | •   | entire property?                                | portion you own?       |
| Other inform   | nation:  | At least one of the d  | lebtors and another   |   |                        |
|  |  | Check if this is cor (see instructions)  | mmunity property  | \$1,000.00                                      | \$1,00                 |
| •  |  | TVs and other recreational vectorial watercraft, fishing vessels,  | ,   |   |                        |

Official Form 106A/B Schedule A/B: Property page 1

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| D   | ebtor 1              | Angelo U. Crocco   | Cas   | e number (if known)                                 |
|---|----------------------|--|---|---|
| 6.  | Example              | old goods and furnishings<br>es: Major appliances, furniture, li | nens, china, kitchenware  |   |
|   | □ No<br>■ Yes.       | Describe   |   |   |
|   |                      | Household bed, dresse  | Goods and Furnishings including but not limite  | d to \$750.00                                       |
| _   |                      |  |   | <u> </u>  |
|   |                      | TV, laptop o   | computer, iPhone, gaming system   | \$550.00  |
| 7.  | ■ No                 |  | o, video, stereo, and digital equipment; computers, printer<br>as, media players, games | s, scanners; music collections; electronic devices  |
| 8. Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card coll other collections, memorabilia, collectibles  No |                      |  |   | objects; stamp, coin, or baseball card collections; |
|   | _ 103.               | Describe  10 silver ea Pokemon ca                                |   | \$400.00  |
|   | Example  ■ No □ Yes. | musical instruments  Describe                                    | ee, and other hobby equipment; bicycles, pool tables, golf                              | clubs, skis; canoes and kayaks; carpentry tools;    |
|   |                      | Describe   |   |   |
|   |                      | Ruger 10/22  | 2 LR rifle  | \$250.00  |
| 11  | □ No                 |  | ner coats, designer wear, shoes, accessories  |   |
|   |                      | ordinary us  | ed clothing   | \$300.00  |
|   | ■ No<br>□ Yes.       |  | iewelry, engagement rings, wedding rings, heirloom jewel                                | ry, watches, gems, gold, silver                     |
|   | ■ No                 | oles: Dogs, cats, birds, horses  Describe                        |   |   |
| 14  | ■ No                 | her personal and household ite                                   | ems you did not already list, including any health aids                                 | you did not list                                    |

Schedule A/B: Property

Official Form 106A/B

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| Debt   | tor 1 Angelo U. Cı   |  |   | Case number (if known)                         |   |
|--------|--|--|---|--|---|
| 15.    |  |  | art 3, including any entries for pag  | es you have attached                           | \$2,250.00  |
| Part • | 4: Describe Your Finance   | cial Assets  |   |  |   |
| Do y   | ou own or have any le  | egal or equitable interest in                                  | any of the following?   |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|        | Examples: Money you h  | have in your wallet, in your ho                                | ome, in a safe deposit box, and on ha   | nd when you file your petition                 |   |
|        |  |  |   | cash   | \$100.00  |
|        |  |  | ounts; certificates of deposit; shares in with the same institution, list each.  Institution name:  TD Bank Santander gs Discover Bank Coinbase.com cryptocur |  | ises, and other similar   |
|        | Bonds, mutual funds, of Examples: Bond funds, I No                                   | Institution or issuer  |   | ts   |   |
|        |  | 2 shares Exxon   | stock   |  | \$83.94   |
|        | joint venture<br>I <sub>No</sub>   | ock and interests in incorports ormation about them            | orated and unincorporated busines   | sses, including an interest in % of ownership: | n an LLC, partnership, and  |
|        | Negotiable instruments   | include personal checks, cas<br>nents are those you cannot tra | otiable and non-negotiable instrume<br>shiers' checks, promissory notes, and<br>unsfer to someone by signing or delive  | money orders.                                  |   |
|        | Retirement or pension<br>Examples: Interests in I<br>I No<br>I Yes. List each accoun | IRA, ERISA, Keogh, 401(k), 4<br>nt separately.                 | 03(b), thrift savings accounts, or othe   | er pension or profit-sharing pla               | ins   |
|        |  | Type of account:   | Institution name:   |  |   |
|        |  | Employee retirement<br>savings account<br>excluded from debtor | Employer plan administra  | ator   | Unknown   |

Official Form 106A/B Schedule A/B: Property page 3

estate

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| De  | ebtor 1              | Angelo U. Crocco   | Case number (if known)                                 |   |
|-----|----------------------|--|--|---|
| 22. | Your sha             | deposits and prepayments  are of all unused deposits you have made so that you may  be a second of the second of t |  | s, or others  |
|     |                      | Instituti  | on name or individual:                                 |   |
|     | ■ No                 | s (A contract for a periodic payment of money to you, either   | er for life or for a number of years)                  |   |
|     | ☐ Yes                |  |  |   |
| 24. |                      | in an education IRA, in an account in a qualified ABLE §§ 530(b)(1), 529A(b), and 529(b)(1).   | program, or under a qualified state tuition program    | am.   |
|     | ☐ Yes                | Institution name and description. Separately f   | ile the records of any interests.11 U.S.C. § 521(c):   |   |
|     | ■ No                 | quitable or future interests in property (other than any   | thing listed in line 1), and rights or powers exerci   | sable for your benefit  |
|     |                      | ive specific information about them  |  |   |
| 26. | ,                    | copyrights, trademarks, trade secrets, and other intell s: Internet domain names, websites, proceeds from royalti  |  |   |
|     | ☐ Yes. G             | ive specific information about them  |  |   |
| 27. |                      | s, franchises, and other general intangibles s: Building permits, exclusive licenses, cooperative associ   | ation holdings, liquor licenses, professional licenses |   |
|     | Yes. G               | ive specific information about them  |  |   |
|     |                      | drivers license  |  | \$0.00  |
|     |                      | firearm permit   |  | Ψ0.00   |
| M   | oney or pr           | operty owed to you?  |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refu             | nds owed to you  |  |   |
|     | ■ No<br>□ Yes. Gi    | ve specific information about them, including whether you  | already filed the returns and the tax years            |   |
| 29. | Family so<br>Example | upport<br>s: Past due or lump sum alimony, spousal support, child s  | upport, maintenance, divorce settlement, property se   | ttlement  |
|     |                      | ve specific information  |  |   |
| 30. | Example<br>_         | nounts someone owes you<br>s: Unpaid wages, disability insurance payments, disability<br>benefits; unpaid loans you made to someone else   | benefits, sick pay, vacation pay, workers' compensa    | tion, Social Security   |
|     | ■ No<br>□ Yes. G     | ive specific information   |  |   |
| 31. | Example              | in insurance policies s: Health, disability, or life insurance; health savings accou   | unt (HSA); credit, homeowner's, or renter's insurance  |   |
|     | ■ No<br>□ Yes. Na    | ame the insurance company of each policy and list its valu<br>Company name:  | e.<br>Beneficiary:                                     | Surrender or refund   |

value:

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| Deb          | tor 1      | Angelo U. Crocco   |                            | Case number (if known)         |                        |
|--------------|------------|--|----------------------------|--------------------------------|------------------------|
|              | If you a   | erest in property that is due you from someone who has<br>are the beneficiary of a living trust, expect proceeds from a li<br>ne has died. |                            | are currently entitled to rece | eive property because  |
|              | Yes.       | Give specific information  |                            |                                |                        |
|              |            | against third parties, whether or not you have filed a law oles: Accidents, employment disputes, insurance claims, or r                    |                            | and for payment                |                        |
|              | Yes.       | Describe each claim  |                            |                                |                        |
|              | Other o    | contingent and unliquidated claims of every nature, inclu  | iding counterclaims of     | of the debtor and rights to    | set off claims         |
| _            | _          | Describe each claim  |                            |                                |                        |
| _            |            | ancial assets you did not already list   |                            |                                |                        |
|              | No<br>Yes. | Give specific information  |                            |                                |                        |
| 36.          |            | he dollar value of all of your entries from Part 4, includir<br>art 4. Write that number here  |                            | es you have attached           | \$632.62               |
| Part         | 5: Des     | scribe Any Business-Related Property You Own or Have an Inte   | est In. List any real esta | te in Part 1.                  |                        |
|              | -          | own or have any legal or equitable interest in any business-relat<br>to Part 6.  | ed property?               |                                |                        |
|              | Yes. G     | so to line 38.   |                            |                                |                        |
|              |            |  |                            |                                |                        |
| Part         |            | scribe Any Farm- and Commercial Fishing-Related Property You<br>ou own or have an interest in farmland, list it in Part 1.                 | Own or Have an Interes     | t In.                          |                        |
| 46. <b>[</b> |            | own or have any legal or equitable interest in any farm-   | or commercial fishin       | g-related property?            |                        |
|              |            | Go to Part 7.  |                            |                                |                        |
|              | ☐ Yes.     | Go to line 47.   |                            |                                |                        |
| Part         | 7:         | Describe All Property You Own or Have an Interest in That Yo   | u Did Not List Above       |                                |                        |
|              | Examp      | have other property of any kind you did not already list ples: Season tickets, country club membership                                     | ?                          |                                |                        |
|              | No<br>Yes. | Give specific information  |                            |                                |                        |
|              |            | ·  |                            | 1                              | *                      |
| 54.          | Add t      | he dollar value of all of your entries from Part 7. Write th   | at number nere             |                                | \$0.00                 |
| Part         | 8:         | List the Totals of Each Part of this Form  |                            |                                |                        |
| 55.          | Part 1     | : Total real estate, line 2  |                            |                                | \$0.00                 |
| 56.          |            | 2: Total vehicles, line 5  | \$1,000.00                 |                                |                        |
| 57.          |            | 3: Total personal and household items, line 15   | \$2,250.00                 |                                |                        |
| 58.          |            | l: Total financial assets, line 36   | \$632.62                   |                                |                        |
| 59.          |            | : Total business-related property, line 45   | \$0.00                     |                                |                        |
| 60.          |            | : Total farm- and fishing-related property, line 52  | \$0.00                     |                                |                        |
| 61.          |            | ': Total other property not listed, line 54 +  | \$0.00                     | Convinced and and a            | otol #0.000.00         |
| 62.          | ıotal      | personal property. Add lines 56 through 61   | \$3,882.62                 | Copy personal property to      | otal <b>\$3,882.62</b> |
| 63.          | Total      | of all property on Schedule A/B. Add line 55 + line 62   |                            |                                | \$3.882.62             |

\$3,882.62

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Debtor 1 Angelo U. Crocco Case number (if known)

Official Form 106A/B Schedule A/B: Property page 6

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| Fill in this infor  | mation to identify your  | case:                 |           |   |                                    |
|---------------------|--------------------------|-----------------------|-----------|---|------------------------------------|
| Debtor 1            | Angelo U. Crocco         | )                     |           |   |                                    |
|                     | First Name               | Middle Name           | Last Name | _ |                                    |
| Debtor 2            |                          |                       |           |   |                                    |
| (Spouse if, filing) | First Name               | Middle Name           | Last Name |   |                                    |
| United States Ba    | ankruptcy Court for the: | DISTRICT OF NEW JERSE | ΞΥ        |   |                                    |
| Case number         |                          |                       |           |   |                                    |
| (if known)          |                          |                       |           |   | Check if this is an amended filing |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. |                                      |        |   |                                    |  |  |
|----|---|--------------------------------------|--------|---|------------------------------------|--|--|
|    | ☐ You are claiming state and federal nonban   | kruptcy exemptions.                  | 11 U.S | S.C. § 522(b)(3)  |                                    |  |  |
|    | ■ You are claiming federal exemptions. 11 l   | J.S.C. § 522(b)(2)                   |        |   |                                    |  |  |
| 2. | For any property you list on Schedule A/B   | that you claim as exe                | empt,  | fill in the information below.                                  |                                    |  |  |
|    | Brief description of the property and line on Schedule A/B that lists this property               | Current value of the portion you own | Amo    | ount of the exemption you claim                                 | Specific laws that allow exemption |  |  |
|    |   | Copy the value from<br>Schedule A/B  | Che    | eck only one box for each exemption.                            |                                    |  |  |
|    | 1997 Lexus ES 171k miles Line from Schedule A/B: 3.1  | \$1,000.00                           |        | \$1,000.00  | 11 U.S.C. § 522(d)(2)              |  |  |
|    | Line from Schedule AVB. 3.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|    | Household Goods and Furnishings including but not limited to bed,                                 | \$750.00                             |        | \$750.00  | 11 U.S.C. § 522(d)(3)              |  |  |
|    | dresser, lamp Line from Schedule A/B: 6.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|    | TV, laptop computer, iPhone, gaming system  | \$550.00                             |        | \$550.00  | 11 U.S.C. § 522(d)(5)              |  |  |
|    | Line from Schedule A/B: 6.2   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|    | 10 silver eagle coins<br>Pokemon cards  | \$400.00                             |        | \$400.00  | 11 U.S.C. § 522(d)(5)              |  |  |
|    | Line from Schedule A/B: 8.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|    | Ruger 10/22 LR rifle Line from Schedule A/B: 10.1   | \$250.00                             |        | \$250.00  | 11 U.S.C. § 522(d)(5)              |  |  |
|    | Line Holli Schedule AVB. 10.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |

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| Debto  | tor 1 Angelo U. Crocco   |                                      |                                   | Case number (if known)  |                                    |  |  |
|--------|--|--------------------------------------|-----------------------------------|---|------------------------------------|--|--|
|        | rief description of the property and line on<br>chedule A/B that lists this property   | Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption |  |  |
|        |  | Copy the value from<br>Schedule A/B  | Che                               | eck only one box for each exemption.                            |                                    |  |  |
|        | ordinary used clothing ine from Schedule A/B: 11.1   | \$300.00                             |                                   | \$300.00  | 11 U.S.C. § 522(d)(3)              |  |  |
|        | The Holli Generale A.B. TTT  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| cash   | ash<br>ne from <i>Schedule A/B</i> : <b>16.1</b>   | \$100.00                             |                                   | \$100.00  | 11 U.S.C. § 522(d)(5)              |  |  |
| LI     | ne nom <i>Schedule AVB.</i> 10.1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|        | hecking/savings account: TD Bank<br>antander   | \$448.68                             |                                   | \$448.68  | 11 U.S.C. § 522(d)(5)              |  |  |
| D<br>C | iscover Bank oinbase.com cryptocurrency ne from Schedule A/B: 17.1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| _      | shares Exxon stock   | \$83.94                              |                                   | \$83.94   | 11 U.S.C. § 522(d)(5)              |  |  |
| LI     | ne from <i>Schedule A/B</i> : <b>18.1</b>  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|        | re you claiming a homestead exemption of Subject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covered No No Yes | 3 years after that for ca            | ases fi                           | •   | ,                                  |  |  |

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| Fill in this infor  | Fill in this information to identify your case: |                        |           |  |                       |  |  |
|---------------------|---|------------------------|-----------|--|-----------------------|--|--|
| Debtor 1            | Angelo U. Crocco                                | )                      |           |  |                       |  |  |
|                     | First Name                                      | Middle Name            | Last Name |  |                       |  |  |
| Debtor 2            |   |                        |           |  |                       |  |  |
| (Spouse if, filing) | First Name                                      | Middle Name            | Last Name |  |                       |  |  |
| United States Ba    | ankruptcy Court for the:                        | DISTRICT OF NEW JERSEY |           |  |                       |  |  |
| Case number         |   |                        |           |  |                       |  |  |
| (if known)          |   |                        |           |  | ☐ Check if this is an |  |  |
|                     |   |                        |           |  | amended filing        |  |  |

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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|  |   | Document  | Page 19 of 54   |   |
|--|---|---|---|---|
| Fill in thi  | s information to identify your  | case:   |   |   |
| Debtor 1   | Angelo U. Crocco  |   |   |   |
| 200.0.   | First Name  | Middle Name   | Last Name   |   |
| Debtor 2   | E AN  | Mills N   |   |   |
| (Spouse if, fi                                       | 0,  | Middle Name   | Last Name   |   |
| United St  | ates Bankruptcy Court for the:  | DISTRICT OF NEW JERSEY  |   |   |
| Case nun   | nber  |   |   |   |
| (if known)   |   |   |   | ☐ Check if this is an   |
|  |   |   |   | amended filing  |
| Official   | Form 106E/F   |   |   |   |
|  | _   | ha Hava Unasaurad   | Claima  | 12/15   |
|  |   | ho Have Unsecured   | Y claims and Part 2 for creditors with NONPR  |   |
| Schedule (<br>Schedule I<br>left. Attach<br>name and | Executory Contracts and Unexp<br>Creditors Who Have Claims Sect<br>the Continuation Page to this pag<br>case number (if known). | ired Leases (Official Form 106G). D<br>ured by Property. If more space is a<br>e. If you have no information to rep | ist executory contracts on Schedule A/B: Pro<br>to not include any creditors with partially sec<br>needed, copy the Part you need, fill it out, nu<br>port in a Part, do not file that Part. On the top | cured claims that are listed in imber the entries in the boxes on the |
| Part 1:  | List All of Your PRIORITY Un  |   |   |   |
| _  | y creditors have priority unsecure  | d claims against you?   |   |   |
|  | . Go to Part 2.   |   |   |   |
| ☐ Ye   | S.  |   |   |   |
| Part 2:  | List All of Your NONPRIORIT   | Y Unsecured Claims  |   |   |
|  | y creditors have nonpriority unsec  |   |   |   |
| _  |   | art. Submit this form to the court with   | vour other schedules  |   |
|  |   | art. Submit this form to the court with   | your other scriedules.  |   |
| ■ Ye   | S.  |   |   |   |
| unsec  | ured claim, list the creditor separately<br>ne creditor holds a particular claim, li  | for each claim. For each claim listed   | e creditor who holds each claim. If a creditor I, identify what type of claim it is. Do not list claim have more than three nonpriority unsecured clair   | ns already included in Part 1. If more                                |
|  |   |   |   | Total claim   |
| 4.1  | merican Honda Finance Co  | orp Last 4 digits of acc  | ount number 1773  | \$4,203.98  |
| N  | onpriority Creditor's Name  |   |   |   |
|  | 01 Little Falls Drive<br>Vilmington, DE 19808   | When was the debt   | incurred?   |   |
|  | umber Street City State Zip Code  | As of the date you  | file, the claim is: Check all that apply  |   |
| V  | /ho incurred the debt? Check one.   |   |   |   |
|  | Debtor 1 only   | ☐ Contingent  |   |   |
|  | Debtor 2 only   | ☐ Unliquidated  |   |   |
|  | Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |   |
|  | At least one of the debtors and and   | other Type of NONPRIOR  | RITY unsecured claim:   |   |
|  | Check if this claim is for a comm   |   |   |   |
|  | ebt   |   | ng out of a separation agreement or divorce that  | you did not   |
| _  | the claim subject to offset?  | report as priority clair  | or profit-sharing plans, and other similar debts  |   |
|  | No  |   |   |   |
| L  | Yes   | Other. Specify  | Auto Loan Deficiency  |   |

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| or 1 Angelo U. Crocco  | Case number (if known)  |            |
|--|---|------------|
| Bayshore Community Hospital Nonpriority Creditor's Name              | Last 4 digits of account number 2292  | \$1,242.00 |
| 727 N Beers Street<br>Holmdel, NJ 07733                              | When was the debt incurred?   |            |
| Number Street City State Zip Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply   |            |
| ■ Debtor 1 only  | ☐ Contingent  |            |
| Debtor 2 only  | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |            |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |            |
| debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| No   | Debts to pension or profit-sharing plans, and other similar debts   |            |
| Yes  | Other. Specify Medical  |            |
| Bloomingdale's   | Last 4 digits of account number   | \$697.00   |
| Nonpriority Creditor's Name P.O. Box 8066 Mason, OH 45040            | When was the debt incurred?   |            |
| Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |            |
| ■ Debtor 1 only  | ☐ Contingent  |            |
| Debtor 2 only  | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  |            |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |            |
| debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |            |
| ☐ Yes  | ■ Other. Specify Credit   |            |
| Capital One  | Last 4 digits of account number 2926  | \$1,832.06 |
| Nonpriority Creditor's Name Bankruptcy Department PO Box 30285       | When was the debt incurred?   |            |
| Salt Lake City, UT 84130-0285  Number Street City State Zip Code     | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                                    | _   |            |
| Debtor 1 only  | Contingent  |            |
| Debtor 2 only  | Unliquidated  |            |
| Debtor 1 and Debtor 2 only   | Disputed  |            |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim: ☐ Student loans  |            |
| ☐ Check if this claim is for a community debt                        | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |
| Is the claim subject to offset?                                      | report as priority claims  Debts to pension or profit-sharing plans, and other similar debts              |            |
| ■ No   |   |            |
| Yes  | ■ Other. Specify Credit   |            |

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| Debto | Or 1 Angelo U. Crocco   | Case number (if known)  |            |
|-------|---|---|------------|
| 4.5   | Capital One   | Last 4 digits of account number   | \$894.00   |
|       | Nonpriority Creditor's Name Bankruptcy Department PO Box 30285  | When was the debt incurred?   |            |
|       | Number Street City State Zip Code Who incurred the debt? Check one.                                     | As of the date you file, the claim is: Check all that apply   |            |
|       | ■ Debtor 1 only   | ☐ Contingent  |            |
|       | ☐ Debtor 2 only   | ☐ Unliquidated  |            |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |            |
|       | debt<br>Is the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |            |
|       | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |
|       | Yes   | ■ Other. Specify Credit   |            |
| 4.6   | Capital One Nonpriority Creditor's Name   | Last 4 digits of account number 4583  | \$455.02   |
|       | Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285  | When was the debt incurred?   |            |
|       | Number Street City State Zip Code Who incurred the debt? Check one.                                     | As of the date you file, the claim is: Check all that apply   |            |
|       | ■ Debtor 1 only   | ☐ Contingent  |            |
|       | Debtor 2 only   | ☐ Unliquidated  |            |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |            |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|       | No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
|       | Yes   | Other. Specify Credit   |            |
| 4.7   | LVNV Funding LLC  | Last 4 digits of account number   | \$1,047.07 |
|       | Nonpriority Creditor's Name Att: Stenger & Stenger, PC 2618 East Paris Avenue SE Grand Rapids, MI 49546 | When was the debt incurred?   |            |
|       | Number Street City State Zip Code   | As of the date you file, the claim is: Check all that apply   |            |
|       | Who incurred the debt? Check one.   |   |            |
|       | ■ Debtor 1 only   | ☐ Contingent  |            |
|       | Debtor 2 only   | ☐ Unliquidated  |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|       | ☐ Check if this claim is for a community debt   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not           |            |
|       | Is the claim subject to offset?   | report as priority claims   |            |
|       | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |
|       | Yes   | ■ Other. Specify Credit   |            |

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Case number (if known)

| Debtor | 1 Angelo U. Crocco   | Case number (if known)  |            |
|--------|--|---|------------|
| 4.8    | Macy's   | Last 4 digits of account number 8794  | \$472.00   |
|        | Nonpriority Creditor's Name Att: Bankruptcy Dept. PO Box 8053 Mason, OH 45040  | When was the debt incurred?   |            |
|        | Number Street City State Zip Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|        | ■ Debtor 1 only  | ☐ Contingent  |            |
|        | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ☐ Unliquidated ☐ Disputed   |            |
|        | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |            |
|        | Yes  | Other. Specify Credit   |            |
| 4.9    | Merrick Bank   | Last 4 digits of account number   | \$1,340.00 |
|        | Nonpriority Creditor's Name Cardworks Servicing PO Box 9201 Old Bethpage, NY 11804   | When was the debt incurred?   |            |
|        | Number Street City State Zip Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|        | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only   | ☐ Contingent ☐ Unliquidated ☐ Disputed  |            |
|        | ☐ At least one of the debtors and another ☐ Check if this claim is for a community   | Type of NONPRIORITY unsecured claim:  Student loans   |            |
|        | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |            |
|        | ■ No □ Yes   | □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit   |            |
| 4.1    | Midland Funding  | Last 4 digits of account number 4614  | \$733.81   |
|        | Nonpriority Creditor's Name Att: Pressler, Felt & Warshaw, LLP 7 Entin Road Parsippany, NJ 07054-5020                        | When was the debt incurred?   |            |
|        | Number Street City State Zip Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|        | Debtor 1 only  | ☐ Contingent  |            |
|        | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ☐ Unliquidated ☐ Disputed   |            |
|        | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?      | Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |            |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |
|        | □Yes   | ■ Other, Specify Credit   |            |

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| Debt                                      | or 1 Angelo U. Crocco   | Case number (if known)   |                   |
|---|---|--|-------------------|
| 4.1<br>1                                  | Midland Funding LLC   | Last 4 digits of account number 0948   | \$1,000.00        |
|   | Nonpriority Creditor's Name Att: Pressler, Felt & Warshaw, LLP 7 Entin Road             | When was the debt incurred?  |                   |
| 4.1 1 N N N N N N N N N N N N N N N N N N | Parsippany, NJ 07054-5020  Number Street City State Zip Code                            | As of the date you file, the claim is: Check all that apply  |                   |
|   | Who incurred the debt? Check one.   |  |                   |
|   | Debtor 1 only   | ☐ Contingent   |                   |
|   | Debtor 2 only   | ☐ Unliquidated   |                   |
|   | Debtor 1 and Debtor 2 only  | ☐ Disputed   |                   |
|   | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |                   |
|   | ☐ Check if this claim is for a community  | ☐ Student loans  |                   |
|   | debt Is the claim subject to offset?  | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                   |
|   | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |                   |
|   | ☐ Yes   | Other. Specify Credit  |                   |
|   | Navient   | Last 4 digits of account number  | \$70,807.00       |
|   | Nonpriority Creditor's Name   | Last 4 digits of account number  | <b>4.0,001.00</b> |
|   | PO Box 9635   | When was the debt incurred? 2017   |                   |
|   | Wilkes-Barre, PA 18773  Number Street City State Zip Code                               | As of the date you file, the claim is: Check all that apply  |                   |
|   | Who incurred the debt? Check one.   | As of the date you me, the dam is. Oneok an that apply   |                   |
|   | ■ Debtor 1 only   | ☐ Contingent   |                   |
|   | Debtor 2 only   | ☐ Unliquidated   |                   |
|   | Debtor 1 and Debtor 2 only  | ☐ Disputed   |                   |
|   | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |                   |
|   | ☐ Check if this claim is for a community  | Student loans  |                   |
|   | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |                   |
|   | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |                   |
|   | Yes   | ☐ Other. Specify   |                   |
|   |   | student loans  |                   |
| 11  |   |  |                   |
| 0   | Progressive Auto Insurance Nonpriority Creditor's Name                                  | Last 4 digits of account number  | \$119.00          |
|   | Att: Credit Collect Service PO Box 607  | When was the debt incurred?  |                   |
|   | Norwood, MA 02062  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |                   |
|   | ■ Debtor 1 only   | ☐ Contingent   |                   |
|   | ☐ Debtor 2 only   | ☐ Unliquidated   |                   |
|   | Debtor 1 and Debtor 2 only  | ☐ Disputed   |                   |
|   | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |                   |
|   | ☐ Check if this claim is for a community  | ☐ Student loans  |                   |
|   | debt  | $\square$ Obligations arising out of a separation agreement or divorce that you did not                                  |                   |
|   | Is the claim subject to offset?   | report as priority claims  |                   |
|   | No  | Debts to pension or profit-sharing plans, and other similar debts  |                   |
|   | ☐ Yes   | ■ Other. Specify Insurance   |                   |

Official Form 106 E/F

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Case number (if known)

| Debto   | or 1 Angelo U. Crocco   | Case number (if known)   |            |
|---------|---|--|------------|
|         |   |  |            |
| 4.1     | Sprint  | Last 4 digits of account number  | \$3,222.00 |
|         | Nonpriority Creditor's Name Att: Enhanced Recovery Co. LLC 8014 Bayberry Road | When was the debt incurred?  |            |
| 4.1 4 5 | Jacksonville, FL 32256  |  |            |
|         | Number Street City State Zip Code   | As of the date you file, the claim is: Check all that apply  |            |
|         | Who incurred the debt? Check one.   |  |            |
|         | ■ Debtor 1 only   | ☐ Contingent   |            |
|         | Debtor 2 only   | ☐ Unliquidated   |            |
|         | Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|         | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:   |            |
|         | ☐ Check if this claim is for a community                                      | ☐ Student loans  |            |
|         | debt Is the claim subject to offset?  | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|         | No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|         | Yes   | Other. Specify Utility   |            |
| 4.1 5   | T-Mobile  | Last 4 digits of account number 3730   | \$2,910.15 |
|         | Nonpriority Creditor's Name Att: Convergent PO Box 9004                       | When was the debt incurred?  |            |
|         | Renton, WA 98057  Number Street City State Zip Code                           | As of the date you file the claim is: Check all that apply   |            |
|         | Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply  |            |
|         | ■ Debtor 1 only   | ☐ Contingent   |            |
|         | Debtor 2 only   | ☐ Unliquidated   |            |
|         | Debtor 1 and Debtor 2 only  | □ Disputed   |            |
|         | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:   |            |
|         | ☐ Check if this claim is for a community                                      | ☐ Student loans  |            |
|         | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |            |
|         | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|         | Yes   | ■ Other. Specify Utility   |            |
| 4.1     | Townst  |  | \$904.00   |
| 6       | Target  Nonpriority Creditor's Name   | Last 4 digits of account number  | \$904.00   |
|         | PO Box 1581<br>Minneapolis, MN 55440-1581                                     | When was the debt incurred?  |            |
|         | Number Street City State Zip Code Who incurred the debt? Check one.           | As of the date you file, the claim is: Check all that apply  |            |
|         | ■ Debtor 1 only   | ☐ Contingent   |            |
|         | Debtor 2 only   | ☐ Unliquidated   |            |
|         | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|         | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:   |            |
|         | ☐ Check if this claim is for a community                                      | ☐ Student loans  |            |
|         | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not  |            |
|         | Is the claim subject to offset?   | report as priority claims  |            |
|         | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|         | Πyes  | Other Specific Credit  |            |

Official Form 106 E/F

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| Debtor 1           | Angelo U. Crocco  | Case number (if known)   |                        |  |  |  |  |  |
|--------------------|---|--|------------------------|--|--|--|--|--|
| /                  | Verizon Wireless  | Last 4 digits of account number 0001   | \$428.57               |  |  |  |  |  |
|                    | Nonpriority Creditor's Name Att: Jefferson Capital Systems 16 McLeland Road Saint Cloud, MN 56303 | When was the debt incurred?  |                        |  |  |  |  |  |
| 4.1 8 Vind A P C   | Number Street City State Zip Code  Who incurred the debt? Check one.                              | As of the date you file, the claim is: Check all that apply  |                        |  |  |  |  |  |
|                    | ■ Debtor 1 only   | ☐ Contingent   |                        |  |  |  |  |  |
|                    | Debtor 2 only   | ☐ Unliquidated   |                        |  |  |  |  |  |
|                    | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |                        |  |  |  |  |  |
|                    | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |                        |  |  |  |  |  |
|                    | ☐ Check if this claim is for a community  | ☐ Student loans  |                        |  |  |  |  |  |
|                    | debt<br>Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                        |  |  |  |  |  |
|                    | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |                        |  |  |  |  |  |
|                    | ☐ Yes   | Other. Specify Utility   |                        |  |  |  |  |  |
| 4 1                |   |  |                        |  |  |  |  |  |
| 8                  | Victoria's Secret   | Last 4 digits of account number 0217   | \$1,046.00             |  |  |  |  |  |
|                    | Nonpriority Creditor's Name Att: Bankruptcy Dept. PO Box 182125                                   | When was the debt incurred?  |                        |  |  |  |  |  |
| _                  | Columbus, OH 43218-2125 Number Street City State Zip Code Who incurred the debt? Check one.       | As of the date you file, the claim is: Check all that apply  |                        |  |  |  |  |  |
|                    | Debtor 1 only   | ☐ Contingent   |                        |  |  |  |  |  |
|                    | ☐ Debtor 2 only   | ☐ Unliquidated   |                        |  |  |  |  |  |
|                    | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |                        |  |  |  |  |  |
|                    | ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:                    |  |                        |  |  |  |  |  |
|                    | ☐ Check if this claim is for a community  | ☐ Student loans  |                        |  |  |  |  |  |
|                    | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                        |  |  |  |  |  |
|                    | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |                        |  |  |  |  |  |
|                    | Yes   | Other. Specify Credit  |                        |  |  |  |  |  |
| Part 3:            | List Others to Be Notified About a D  | ebt That You Already Listed  |                        |  |  |  |  |  |
| is tryin<br>have m | g to collect from you for a debt you owe to s   | I about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, someone else, list the original creditor in Parts 1 or 2, then list the collection agency he nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional creditors here. | ere. Similarly, if you |  |  |  |  |  |
|                    | d Address<br>ano, Stadtmauer &  | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.2 of (Check one):   |                        |  |  |  |  |  |
| PO Bo              |   | ■ Part 2: Creditors with Nonpriority Unsecured Cla   | ims                    |  |  |  |  |  |
| Ciliton            | , NJ 07015-2594   | Last 4 digits of account number 2292   |                        |  |  |  |  |  |
| Hayt, F            | d Address<br>Hayt & Landau  | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.4 of (Check one):   |                        |  |  |  |  |  |
|                    | dustrial Way West<br>own, NJ 07724-0500   | ■ Part 2: Creditors with Nonpriority Unsecured Cla   | ims                    |  |  |  |  |  |
| Latont             | OWII, NO 07724-0300   | Last 4 digits of account number 001 D  |                        |  |  |  |  |  |
|                    | d Address<br>lio Recovery Associates  | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one):   |                        |  |  |  |  |  |
| 140 Co             | rporate Blvd.   | ■ Part 2: Creditors with Nonpriority Unsecured Cla   | ims                    |  |  |  |  |  |
| Norfoll            | k, VA 23502   | Last 4 digits of account number  |                        |  |  |  |  |  |
| Name an            | d Address   | On which entry in Part 1 or Part 2 did you list the original creditor?   |                        |  |  |  |  |  |

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Debtor 1 Angelo U. Crocco

Case number (if known)

Synergetic Communication, Inc. 5450 N.W. Central #220 Houston, TX 77092-2016

Line 4.1 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

7953

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim     |
|--------------|-----|---|-----|-----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|              |     |   |     | Total Claim     |
| Total        | 6f. | Student loans   | 6f. | \$<br>70,807.00 |
| claims       |     |   |     |                 |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>22,546.66 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>93,353.66 |

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| Fill in this infor  | mation to identify your  | case:               |           |  |
|---------------------|--------------------------|---------------------|-----------|--|
| Debtor 1            | Angelo U. Crocco         | )                   |           |  |
|                     | First Name               | Middle Name         | Last Name |  |
| Debtor 2            |                          |                     |           |  |
| (Spouse if, filing) | First Name               | Middle Name         | Last Name |  |
| United States Ba    | ankruptcy Court for the: | DISTRICT OF NEW JEE | RSEY      |  |
| Case number         |                          |                     |           |  |
| (if known)          |                          |                     |           |  |
|                     |                          |                     |           |  |

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | n whom you have the<br>or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          |   |
| 2.2 | •         |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
| 2.3 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          |   |
| 2.4 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          |   |
| 2.5 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     | Number    | Street       |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
|     | •         |              |  |                   |   |

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|                |   | Docume  | nt Page 28 C  | ) 54  |   |
|----------------|---|---|---|---|---|
| Fill in thi    | s information to identify you   | ur case:  |   |   |   |
|                |   |   |   |   |   |
| Debtor 1       | Angelo U. Croc  | Middle Name   | Last Name   |   |   |
| Debtor 2       | . not realite   | made rame   | Zaot Hamo   |   |   |
| (Spouse if, f  | iling) First Name   | Middle Name   | Last Name   |   |   |
| United St      | ates Bankruptcy Court for the   | : DISTRICT OF NEW JE  | RSEY  |   |   |
| Ormod Or       | acco Barmaptoy Court for ano.   |   |   |   |   |
| Case nur       | mber  |   |   |   |   |
| (if known)     |   |   |   |   | ☐ Check if this is an   |
|                |   |   |   |   | amended filing  |
| Officia        | al Form 106H  |   |   |   |   |
|                |   | 1.14  |   |   |   |
| Sche           | dule H: Your Co   | debtors   |   |   | 12/15   |
| 2. Wi<br>Arizo | es  ithin the last 8 years, have young, California, Idaho, Louisian  o. Go to line 3.  es. Did your spouse, former spolumn 1, list all of your code | ou lived in a community pr<br>na, Nevada, New Mexico, Pu<br>pouse, or legal equivalent live<br>btors. Do not include your | roperty state or territon<br>lerto Rico, Texas, Wash<br>e with you at the time? | ry? (Community property s<br>nington, and Wisconsin.) | states and territories include with you. List the person shown creditor on Schedule D (Official |
| Form           |   |   |   |   | chedule E/F, or Schedule G to fill  |
|                | Column 1: Your codebtor<br>Name, Number, Street, City, State and  | d ZIP Code  |   | Column 2: The credi                                   | itor to whom you owe the debt that apply:   |
| 3.1            |   |   |   | Ookedula D. P.  |   |
| 3.1            | Name  |   |   | Schedule D, line                                      |   |
|                |   |   |   | ☐ Schedule E/F, line ☐ Schedule G, line               |   |
|                |   |   |   | □ Scriedule G, line                                   |   |
|                | Number Street   |   |   | <del></del>   |   |
|                | City  | State   | ZIP Code  |   |   |
|                |   |   |   | _   |   |
| 3.2            | News  |   |   | Schedule D, line                                      |   |
|                | Name  |   |   | Schedule E/F, line                                    |   |
|                |   |   |   | ☐ Schedule G, line                                    |   |
|                | Number Street   |   |   | _   |   |
|                | City  | State   | ZIP Code  |   |   |

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|                    |  |                            |   |                     |                | •           |                           |                          |                              |                 |
|--------------------|--|----------------------------|---|---------------------|----------------|-------------|---------------------------|--------------------------|------------------------------|-----------------|
|                    | in this information to identify your category to the state of the stat |                            |   |                     |                |             |                           |                          |                              |                 |
|                    | btor 2 puse, if filing)  |                            |   |                     | _              |             |                           |                          |                              |                 |
| Uni                | ited States Bankruptcy Court for the   | : DISTRICT OF NEW J        | IERSEY  |                     |                |             |                           |                          |                              |                 |
|                    | se number<br>  |                            | -   |                     |                |             |                           | ed filing<br>ent showir  | ng postpetition              |                 |
| O                  | fficial Form 106I  |                            |   |                     |                | _           | /M / DD/ \                |                          | ollowing date.               |                 |
|                    | chedule I: Your Inc  | ome                        |   |                     |                | IV          | /IIVI / DD/ `             | 111                      |                              | 12/15           |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment   | are married and not fili   | ng jointly, and your ith you, do not inclu          | spouse<br>ide infor | is liv<br>mati | ing with    | you, incl<br>t your sp    | ude infori<br>ouse. If m | nation about<br>ore space is | your<br>needed, |
| 1.                 | Fill in your employment information.   |                            | Debtor 1  |                     |                |             | Debtor 2                  | 2 or non-f               | iling spouse                 |                 |
|                    | If you have more than one job, attach a separate page with information about additional  | Employment status          | <ul><li>■ Employed</li><li>□ Not employed</li></ul> | • •                 |                |             | ☐ Employed ☐ Not employed |                          |                              |                 |
|                    | employers.   | Occupation                 | security  |                     |                |             |                           |                          |                              |                 |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name            | Burlington Coa                                      | t Facto             | ry             |             |                           |                          |                              |                 |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address         | COVID FURLOU<br>Hazlet, NJ 0773                     |                     |                |             |                           |                          |                              |                 |
|                    |  | How long employed t        | here? 6 mos   |                     |                |             | _                         |                          |                              |                 |
| Pai                | rt 2: Give Details About Mor   | nthly Income               |   |                     |                |             |                           |                          |                              |                 |
|                    | imate monthly income as of the dause unless you are separated.   | ate you file this form. If | you have nothing to r                               | eport for           | any            | line, write | e \$0 in the              | space. In                | clude your noi               | n-filing        |
|                    | ou or your non-filing spouse have mo<br>e space, attach a separate sheet to  |                            | ombine the information                              | on for all          | empl           | oyers for   | that perso                | on on the li             | nes below. If                | you need        |
|                    |  |                            |   |                     |                | For De      | btor 1                    |                          | btor 2 or<br>ing spouse      |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                            |   | 2.                  | \$             | 2           | ,112.50                   | \$                       | N/A                          |                 |
| 3.                 | Estimate and list monthly overt  | ime pay.                   |   | 3.                  | +\$            |             | 0.00                      | +\$                      | N/A                          |                 |
| 4.                 | Calculate gross Income. Add lir  | ne 2 + line 3.             |   | 4.                  | \$             | 2,1         | 12.50                     | \$                       | N/A                          |                 |

Official Form 106l Schedule I: Your Income page 1

| Deb | tor 1                       | Angelo U. Crocco  | -        | C   | Case           | number ( <i>if ki</i> | nown) |        |                     |                     |                   |
|-----|-----------------------------|---|----------|-----|----------------|-----------------------|-------|--------|---------------------|---------------------|-------------------|
|     |                             |   |          |     |                | Debtor 1              |       | non    | Debtor<br>-filing s | spouse              |                   |
|     | Cop                         | y line 4 here   | 4.       |     | \$_            | 2,112                 | 2.50  | \$     |                     | N/A                 | <u>\</u>          |
| 5.  | List                        | all payroll deductions:   |          |     |                |                       |       |        |                     |                     |                   |
|     | 5a.                         | Tax, Medicare, and Social Security deductions   | 5a       |     | \$             | 542                   | 2.75  | \$     |                     | N/A                 | <u> </u>          |
|     | 5b.                         | Mandatory contributions for retirement plans  | 5b       |     | \$             |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 5c.                         | Voluntary contributions for retirement plans  | 5c       |     | \$             | (                     | 0.00  | \$     |                     | N/A                 | _                 |
|     | 5d.                         | Required repayments of retirement fund loans  | 5d       |     | \$_            |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 5e.                         | Insurance   | 5e       |     | \$             |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 5f.                         | Domestic support obligations Union dues   | 5f.      |     | \$_<br>\$      |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 5g.<br>5h.                  | Other deductions. Specify:  | 5g<br>5h |     | <sup>Ф</sup> _ |                       | 0.00  | · —    |                     | N/A<br>N/A          | _                 |
| 6   |                             | · · · · · · · · · · · · · · · · · · ·   | _        |     | Ψ_<br>\$       |                       |       | · :    |                     |                     | _                 |
| 6.  |                             | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.       |     | <b>–</b>       |                       | 2.75  | \$     |                     | N/A                 | _                 |
| 7.  |                             | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       |     | \$             | 1,569                 | 9.75  | \$     |                     | N/A                 | <u>\</u>          |
| 8.  | List<br>8a.                 | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a       |     | \$             |                       | 0.00  | \$     |                     | N/A                 |                   |
|     | 8b.                         | Interest and dividends  | 8b       |     | <b>\$</b> —    |                       | 0.00  | \$—    |                     | N/A                 |                   |
|     | 8c.                         | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c       |     | *_<br>\$       |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 8d.                         | Unemployment compensation   | 8d       |     | <b>\$</b> —    |                       | 0.00  | \$-    |                     | N/A                 | _                 |
|     | 8e.                         | Social Security   | 8e       |     | <u>*</u> -     |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 8f.                         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:         | 8f.      |     | \$             |                       | 0.00  | \$     |                     | N/A                 |                   |
|     | 8g.                         | Pension or retirement income  | 8g       | ,   | \$_            |                       | 0.00  | \$     |                     | N/A                 | _                 |
|     | 8h.                         | Other monthly income. Specify:  | _ 8h     | 1.+ | \$             | (                     | 0.00  | + \$   |                     | N/A                 | <u>\</u>          |
| 9.  | Add                         | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.       | \$  | S              | (                     | 0.00  | \$     |                     | N/                  | A                 |
| 10  | Cal                         | culate monthly income. Add line 7 + line 9.   | 10.      | \$  |                | 1,569.75              | + \$  |        | N/A                 | = \$                | 1,569.75          |
|     |                             | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |          | Ψ_  |                | 1,303.73              |       |        | 11//                |                     | 1,505.75          |
| 11. | Star<br>Incli<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:      | depe     |     | ,              | ,                     |       | *      |                     | e <i>J</i> .<br>+\$ | 0.00              |
| 12. |                             | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies   |          |     |                |                       |       |        | 12.                 | \$                  | 1,569.75          |
| 13. | Do                          | you expect an increase or decrease within the year after you file this form   | ?        |     |                |                       |       |        |                     | Combi               | ined<br>ly income |
|     |                             | No. Yes, Explain: Income scheduled reflects employment. Debtor  |          | ont | lv f           | urlougho              | d du  | e to C | י טואט              | nander              | nic               |

Official Form 106l Schedule I: Your Income page 2

| FIII   | I in this information to identify your case:   |                      |  |               |                    |                               |
|--------|--|----------------------|--|---------------|--------------------|-------------------------------|
| Deb    | btor 1 Angelo U. Crocco  |                      |  | Check         | if this is:        |                               |
|        |  |                      |  |               | n amended filing   |                               |
|        | btor 2   |                      |  |               |                    | ing postpetition chapter      |
| (Spo   | pouse, if filing)  |                      |  | 1             | 3 expenses as of t | ne following date:            |
| Unit   | ited States Bankruptcy Court for the: DISTRICT OF N  | EW JERSEY            |  | N             | MM / DD / YYYY     |                               |
| Cas    | se number  |                      |  |               |                    |                               |
| (If kı | known)   |                      |  |               |                    |                               |
| Oi     | Official Form 106J   |                      |  |               |                    |                               |
| Sc     | chedule J: Your Expenses   |                      |  |               |                    | 12/15                         |
|        | as complete and accurate as possible. If two m   | arried people are fi | ling together, bo                          | th are equa   | ly responsible for |                               |
| info   | formation. If more space is needed, attach anoth<br>Imber (if known). Answer every question.                         |                      |  |               |                    |                               |
| Par    | art 1: Describe Your Household   |                      |  |               |                    |                               |
| 1.     | Is this a joint case?  |                      |  |               |                    |                               |
|        | ■ No. Go to line 2.  |                      |  |               |                    |                               |
|        | ☐ Yes. Does Debtor 2 live in a separate hous   | ehold?               |  |               |                    |                               |
|        | □ No   |                      |  |               |                    |                               |
|        | ☐ Yes. Debtor 2 must file Official Form 1  | 06J-2. Expenses for  | · Separate Housel                          | nold of Debto | or 2.              |                               |
|        |  | -, <i>p</i>          |  |               |                    |                               |
| 2.     | Do you have dependents? ■ No   |                      |  |               |                    |                               |
|        | □ 1C3.   |                      | Dependent's relation<br>Debtor 1 or Debtor |               | Dependent's age    | Does dependent live with you? |
|        | Do not state the   |                      |  |               |                    | □ No                          |
|        | dependents names.  |                      |  |               |                    | ☐ Yes                         |
|        |  | _                    |  |               |                    | □ No                          |
|        |  |                      |  |               |                    | ☐ Yes                         |
|        |  | _                    |  |               |                    | □ No                          |
|        |  |                      |  |               |                    | ☐ Yes                         |
|        |  | _                    |  |               |                    | □ No                          |
|        |  |                      |  |               |                    | ☐ Yes                         |
| 3.     | Do your expenses include ■ No  | _                    |  |               |                    |                               |
|        | expenses of people other than  |                      |  |               |                    |                               |
|        | yourself and your dependents?  |                      |  |               |                    |                               |
| Par    | art 2: Estimate Your Ongoing Monthly Expens  | ses                  |  |               |                    |                               |
| exp    | stimate your expenses as of your bankruptcy filing penses as of a date after the bankruptcy is filed uplicable date. |                      |  |               |                    |                               |
| Inc    | clude expenses paid for with non-cash governm  | ent assistance if yo | u know                                     |               |                    |                               |
|        | e value of such assistance and have included it  |                      |  |               |                    |                               |
| (Off   | fficial Form 106l.)  |                      |  |               | Your expe          | nses                          |
|        |  |                      |  |               |                    |                               |
| 4.     | The rental or home ownership expenses for y  | our residence. Inclu | ude first mortgage                         | 4. \$         |                    | 600.00                        |
|        | payments and any rent for the ground or lot.   |                      |  | ψ             |                    |                               |
|        | If not included in line 4:   |                      |  |               |                    |                               |
|        | 4a. Real estate taxes  |                      |  | 4a. \$        |                    | 0.00                          |
|        | 4b. Property, homeowner's, or renter's insurar   |                      |  | 4b. \$        |                    | 0.00                          |
|        | 4c. Home maintenance, repair, and upkeep ex  | •                    |  | 4c. \$        |                    | 0.00                          |
| _      | 4d. Homeowner's association or condominium   |                      | aquitu ( la ala                            | 4d. \$        |                    | 0.00                          |
| 5.     | Additional mortgage payments for your residence  | ence, such as nome   | equity loans                               | 5. \$         |                    | 0.00                          |

| Debtor      | r 1 _    | Angelo                | J. Crocco  |                                 | Case num   | ber (if known) |                             |
|-------------|----------|-----------------------|--|---------------------------------|------------|----------------|-----------------------------|
| 6. <b>U</b> | Jtilitie | es:                   |  |                                 |            |                |                             |
| 6           | a.       | Electricity           | , heat, natural gas  |                                 | 6a.        | \$             | 0.00                        |
| 6           | b.       | Water, se             | wer, garbage collection  |                                 | 6b.        | \$             | 0.00                        |
| 6           | ic.      | Telephon              | e, cell phone, Internet, satellite, and ca   | ble services                    | 6c.        | \$             | 0.00                        |
| 6           | id.      | Other. Sp             | ecify:   |                                 | 6d.        | \$             | 0.00                        |
| '. F        | ood      | and hous              | ekeeping supplies  |                                 |            | \$             | 300.00                      |
| 3. <b>C</b> | Childo   | care and              | children's education costs   |                                 | 8.         | \$             | 0.00                        |
| ). <b>C</b> | Clothi   | ing, launc            | ry, and dry cleaning   |                                 | 9.         | \$             | 50.00                       |
| 0. <b>P</b> | erso     | nal care <sub>l</sub> | products and services  |                                 | 10.        | \$             | 35.00                       |
| 1. <b>N</b> | /ledic   | al and de             | ntal expenses  |                                 | 11.        | \$             | 50.00                       |
|             |          |                       | Include gas, maintenance, bus or trai  | n fare.                         | 40         | •              | 200.00                      |
|             |          |                       | ar payments.   |                                 | 12.        | ·              |                             |
|             |          |                       | clubs, recreation, newspapers, mag   | azines, and books               | 13.        | \$             | 160.00                      |
|             |          |                       | ributions and religious donations  |                                 | 14.        | \$             | 20.00                       |
| -           |          | ance.                 | sources deducted from your pay or in   | aludad in linea 4 ar 20         |            |                |                             |
|             |          | Life insura           | nsurance deducted from your pay or in  | ciuded in lines 4 or 20.        | 15a.       | \$             | 0.00                        |
|             |          | Health ins            |  |                                 | 15b.       | ·              | 0.00                        |
|             |          | Vehicle in            |  |                                 | 15c.       | :              | 110.00                      |
|             |          |                       | Irance. Specify:   |                                 | 15d.       | •              | 0.00                        |
|             |          |                       | iclude taxes deducted from your pay o  | rincluded in lines 4 or 20      |            | Ψ              | 0.00                        |
|             | Specif   |                       | icidde taxes deducted from your pay o  | included in lines 4 of 20.      | 16.        | \$             | 0.00                        |
|             |          |                       | ease payments:   |                                 |            |                |                             |
|             |          |                       | ents for Vehicle 1   |                                 | 17a.       | · ·            | 0.00                        |
|             |          |                       | ents for Vehicle 2   |                                 | 17b.       | ·              | 0.00                        |
|             |          | Other. Sp             | -  |                                 | 17c.       |                | 0.00                        |
|             |          | Other. Sp             |  |                                 | 17d.       | \$             | 0.00                        |
|             |          |                       | of alimony, maintenance, and supp<br>your pay on line 5, Schedule I, Your  |                                 | 18.        | \$             | 0.00                        |
|             |          |                       | s you make to support others who d   |                                 |            | \$             | 0.00                        |
|             | Specif   |                       | у са пишно во саррона синово пино с  | ,                               | 19.        |                | 0.00                        |
|             | •        | ,                     | erty expenses not included in lines  | 4 or 5 of this form or on Schee | dule I: Yo | our Income.    |                             |
|             |          |                       | s on other property  |                                 | 20a.       |                | 0.00                        |
| 2           | 0b.      | Real esta             | e taxes  |                                 | 20b.       | \$             | 0.00                        |
| 2           | :0c.     | Property,             | homeowner's, or renter's insurance   |                                 | 20c.       | \$             | 0.00                        |
| 2           | .0d.     | Maintena              | nce, repair, and upkeep expenses   |                                 | 20d.       | \$             | 0.00                        |
| 2           | :0e.     | Homeowr               | er's association or condominium dues   |                                 | 20e.       | \$             | 0.00                        |
| 1. <b>O</b> | Other    | : Specify:            | gifts  |                                 | 21.        | +\$            | 15.00                       |
|             |          |                       | - <del>-</del>   |                                 |            |                |                             |
|             |          | -                     | monthly expenses   |                                 |            | •              | 4 = 40 00                   |
|             |          |                       | through 21.  | ( Official Farms 400   0        |            | \$             | 1,540.00                    |
|             |          |                       | 2 (monthly expenses for Debtor 2), if a  |                                 |            | \$             |                             |
| 2           | 2c. A    | dd line 22            | a and 22b. The result is your monthly  | expenses.                       |            | \$             | 1,540.00                    |
|             |          | -                     | monthly net income.  |                                 |            |                |                             |
|             |          |                       | 12 (your combined monthly income) fr   |                                 | 23a.       |                | 1,569.75                    |
| 2           | :3b.     | Copy you              | monthly expenses from line 22c abov  | e.                              | 23b.       | -\$            | 1,540.00                    |
| 2           | 3c.      | Subtract v            | our monthly expenses from your mont  | hly income.                     |            |                | 22.77                       |
|             |          |                       | is your monthly net income.  | •                               | 23c.       | \$             | 29.75                       |
| F<br>m      | or exa   | ample, do y           | an increase or decrease in your exp<br>ou expect to finish paying for your car loan v<br>terms of your mortgage? |                                 |            |                | se or decrease because of a |
| _           | _        |                       | Explain here: Expenses assume  | employment.                     |            |                |                             |
|             | Ye       | S.                    | LAPIGIII HEIE. LAPEHSES ASSUME   | emproyment.                     |            |                |                             |

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| Fill in this infor                  | mation to identify your                               | case.                          |                            |  |         |
|-------------------------------------|---|--------------------------------|----------------------------|--|---------|
| Debtor 1                            | Angelo U. Crocco                                      |                                |                            |  |         |
| Debior 1                            | First Name  | Middle Name                    | Last Name                  |  |         |
| Debtor 2                            |   |                                |                            |  |         |
| (Spouse if, filing)                 | First Name  | Middle Name                    | Last Name                  |  |         |
| United States Ba                    | ankruptcy Court for the:                              | DISTRICT OF NEW JERSEY         |                            |  |         |
| Case number                         |   |                                |                            |  |         |
| (if known)                          |   |                                |                            | ☐ Check if this is amended filing  | an      |
| Official Form                       |   | an Individual De               | btor's Sched               | lules  | 12/15   |
| obtaining mone<br>years, or both. 1 | y or property by fraud i<br>l8 U.S.C. §§ 152, 1341, 1 | n connection with a bankruptc  | y case can result in fines | g a false statement, concealing proper<br>up to \$250,000, or imprisonment for u | p to 20 |
|                                     |   | eone who is NOT an attorney to | help you fill out bankrup  | tcy forms?   |         |
| ■ No                                |   |                                |                            |  |         |
| ☐ Yes. I                            | Name of person  |                                |                            | Attach Bankruptcy Petition Preparer's  Declaration, and Signature (Official Fo   |         |
|                                     | alty of perjury, I declare<br>re true and correct.    | that I have read the summary a | and schedules filed with t | his declaration and  |         |
| X /s/ And                           | gelo U. Crocco  |                                | X                          |  |         |
| Angel                               | o U. Crocco<br>ire of Debtor 1                        |                                | Signature of Debtor 2      | 2  |         |
| Date                                | 4/22/2020   |                                | Date                       |  |         |

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| Fill in th  | nis inform  | ation to identify you   | r case:   |   |   |   |
|---|---|-------------------------|---|---|---|---|
| Debtor '  |   | Angelo U. Croco         |   |   |   |   |
| Debioi  |   | First Name              | Middle Name   | Last Name   |   |   |
| Debtor 2<br>(Spouse if, filing)   |   | First Name              | Middle Name   | Last Name   |   |   |
|   |   | kruptcy Court for the:  | DISTRICT OF NEW JER   |   |   |   |
| _   |   |                         |   |   |   |   |
| Case nu<br>(if known)   | umber   |                         |   |   | _   | Check if this is an mended filing                     |
| State<br>Be as co   | ement<br>omplete a  | nd accurate as possi    | attach a separate sheet to  | are filing together, both are                         | ankruptcy<br>equally responsible for sup<br>additional pages, write you |   |
| Part 1:   | Give D  | etails About Your Ma    | rital Status and Where You  | Lived Before  |   |   |
| 1. Wh   | What is your current marital status?  |                         |   |   |   |   |
| □   | Married<br>Not marr   | ried                    |   |   |   |   |
| 2. Dur  | During the last 3 years, have you lived anywhere other than where you live now? |                         |   |   |   |   |
| ■   | No<br>Yes. List   | all of the places you I | ived in the last 3 years. Do n  | ot include where you live now                         | ·.  |   |
| De  | btor 1 Pri  | or Address:             | Dates Debtor 1 lived there  | Debtor 2 Prior Ad                                     | dress:  | Dates Debtor 2<br>lived there                         |
|   |   |                         |   |   | ity property state or territory<br>co, Texas, Washington and W          |   |
| Dort 2  |   | ,                       | nedule H: Your Codebtors (O   | fficial Form 106H).                                   |   |   |
| Part 2  | Explair   | n the Sources of You    | rincome   |   |   |   |
| Fill  | in the tota   | I amount of income yo   | nployment or from operatin<br>u received from all jobs and a<br>have income that you receiv | all businesses, including part-                       |   | ndar years?   |
| ■   | No<br>Yes. Fill   | in the details.         |   |   |   |   |
|   |   |                         | Debtor 1  |   | Debtor 2  |   |
|   |   |                         | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                              | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: |   |                         | ■ Wages, commissions, bonuses, tips   | \$5,461.43  | ☐ Wages, commissions, bonuses, tips                                     |   |
|   |   |                         | ☐ Operating a business  |   | ☐ Operating a business  |   |

Official Form 107

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Debtor 1 Angelo U. Crocco Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$9,127.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$3,694.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. □ Yes

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe Was this payment for ...

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Debtor 1 Case number (if known) Angelo U. Crocco Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Midland Funding LLC v. Angelo Civil Superior Court of NJ Pending Crocco Law Division-Special Civil □ On appeal DC-001413-17 Middlesex County □ Concluded New Brunswick, NJ 08903 LVNV Funding LLC v. Angelo Civil Superior Court of NJ Pending Crocco Law Division-Special Civil □ On appeal DC-012656-16 Middlesex County □ Concluded New Brunswick, NJ 08903 Midland Funding LLC v. Angelo Civil **Superior Court of NJ** Pending Law Division-Special Civil Crocco □ On appeal DC-009784-18 **Middlesex County** □ Concluded New Brunswick, NJ 08903 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the Explain what happened 3/2020 \$125.00

Midland Funding Att: Pressler, Felt & Warshaw, LLP 7 Entin Road Parsippany, NJ 07054-5020

bank levy

property

☐ Property was repossessed.

☐ Property was foreclosed.

☐ Property was garnished.

Property was attached, seized or levied.

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Debtor 1 Angelo U. Crocco Case number (if known)

|     | 71119010 01 010000  |             |  | · · /                             |                         |  |  |
|-----|---|-------------|--|-----------------------------------|-------------------------|--|--|
|     |   |             |  |                                   |                         |  |  |
| 11. | accounts or refuse to make a payment b  |             | did any creditor, including a bank or financial ins<br>you owed a debt?  | stitution, set off any a          | amounts from your       |  |  |
|     | Yes. Fill in the details.   |             |  |                                   |                         |  |  |
|     | Creditor Name and Address   | De          | scribe the action the creditor took  | Date action was taken             | Amount                  |  |  |
| 12. | Within 1 year before you filed for bankru court-appointed receiver, a custodian, o  ■ No □ Yes  |             | as any of your property in the possession of an a<br>er official?  | assignee for the bene             | efit of creditors, a    |  |  |
| Pai | t 5: List Certain Gifts and Contribution  | าร          |  |                                   |                         |  |  |
| 13. | Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift.  | ruptcy, d   | did you give any gifts with a total value of more t  | han \$600 per person <sup>.</sup> | ?                       |  |  |
|     | Gifts with a total value of more than \$60 per person   | 00          | Describe the gifts   | Dates you gave the gifts          | Value                   |  |  |
|     | Person to Whom You Gave the Gift and Address:   | l           |  |                                   |                         |  |  |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No □ Yes. Fill in the details for each gift or contribution. |             |  |                                   |                         |  |  |
|     | Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod   |             | Describe what you contributed  | Dates you contributed             | Value                   |  |  |
| Pai | t 6: List Certain Losses  |             |  |                                   |                         |  |  |
| 15. | or gambling?  | ıptcy or    | since you filed for bankruptcy, did you lose any   | thing because of the              | t, fire, other disaster |  |  |
|     | Yes. Fill in the details.   |             |  |                                   |                         |  |  |
|     | Describe the property you lost and how the loss occurred  | Include     | be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property. | Date of your loss                 | Value of property lost  |  |  |
| Pai | t 7: List Certain Payments or Transfer  | s           |  |                                   |                         |  |  |
| 16. | consulted about seeking bankruptcy or   | preparii    | d you or anyone else acting on your behalf pay on gar bankruptcy petition? s, or credit counseling agencies for services required        |                                   | rty to anyone you       |  |  |
|     | <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>  |             |  |                                   |                         |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not \   | <b>í</b> ou | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment       |  |  |
|     | Warren Brumel, Esq. 65 Main Street PO Box 181 Keyport, NJ 07735 www.keyportlaw.com  |             | atttorney fee  | 4/22/2020                         | \$1,500.00              |  |  |

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Debtor 1 Angelo U. Crocco

Case number (if known)

|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You   | Description and value transferred                                     | of any property         | Date payment or transfer was made                            | Amount of payment                             |
|-----|---|---|-------------------------|--|---|
|     | Debt Education and Certification<br>Foundat<br>112 Goliad St<br>Fort Worth, TX 76126<br>www.bkcert.com  | pre-bankruptcy cred   | it counseling           | 4/8/2020   | \$15.00                                       |
| 17. | Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on Do not include any payment or transfer that you lis  No Yes. Fill in the details.   | or to make payments to yo   |                         | or transfer any proper                                       | ty to anyone who                              |
|     | Person Who Was Paid<br>Address  | Description and value transferred                                     | of any property         | Date payment or transfer was made                            | Amount of payment                             |
| 18. | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis  No Yes. Fill in the details. | ness or financial affairs?<br>as security (such as the gra            |                         |  |   |
|     | Person Who Received Transfer<br>Address   | Description and value property transferred                            | paymen                  | e any property or<br>ts received or debts<br>exchange        | Date transfer was made                        |
|     | Person's relationship to you  |   |                         |  |   |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.   |   | perty to a self-settled | trust or similar device o                                    | of which you are a                            |
|     | Name of trust   | Description and value   | of the property transfe | erred  | Date Transfer was made                        |
| Par | t 8: List of Certain Financial Accounts, Instru   | ments, Safe Deposit Box   | es, and Storage Units   |  | muuc  |
| 20. | Within 1 year before you filed for bankruptcy, w sold, moved, or transferred?   | •   |                         |  |   |
|     | Include checking, savings, money market, or of houses, pension funds, cooperatives, associated No  Yes. Fill in the details.  |   |                         | shares in banks, credit                                      | unions, brokerage                             |
|     |   |   | rument c                | Date account was<br>closed, sold,<br>noved, or<br>ransferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables?  | before you filed for bank   | ruptcy, any safe depo   | sit box or other deposit                                     | ory for securities,                           |
|     | ■ No □ Yes. Fill in the details.  |   |                         |  |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had access to Address (Number, Street, C State and ZIP Code) |                         | e contents   | Do you still have it?                         |
|     |   |   |                         |  |   |

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Debtor 1 Angelo U. Crocco

Case number (if known)

| 22.    | Have you stored property in a storage unit or pla   | ace other than your home within 1   | year before you filed for bankruptcy?  | •                     |  |
|--------|---|---|--|-----------------------|--|
|        | ■ No □ Yes. Fill in the details.  |   |  |                       |  |
|        | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code) | Describe the contents                  | Do you still have it? |  |
| Par    | 9: Identify Property You Hold or Control for S  | •   |  |                       |  |
| 23.    | Do you hold or control any property that someon for someone.  | ne else owns? Include any proper  | ty you borrowed from, are storing for, | or hold in trust      |  |
|        | ■ No □ Yes. Fill in the details.  |   |  |                       |  |
|        | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)               | Describe the property                  | Value                 |  |
| Par    | 10: Give Details About Environmental Informa  | ition   |  |                       |  |
| For    | he purpose of Part 10, the following definitions a  | apply:  |  |                       |  |
|        | Environmental law means any federal, state, or l<br>toxic substances, wastes, or material into the ai<br>regulations controlling the cleanup of these sub | r, land, soil, surface water, ground  | •                                      |                       |  |
|        |   |   |  |                       |  |
|        | <i>Hazardous material</i> means anything an environr<br>hazardous material, pollutant, contaminant, or s  |   | s waste, hazardous substance, toxic s  | ubstance,             |  |
| Rep    | ort all notices, releases, and proceedings that yo  | u know about, regardless of wher  | n they occurred.                       |                       |  |
| 24.    | Has any governmental unit notified you that you   | may be liable or potentially liable   | under or in violation of an environme  | ntal law?             |  |
|        | No  |   |  |                       |  |
|        | Yes. Fill in the details.   |   |  |                       |  |
|        | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)                  | Environmental law, if you know it      | Date of notice        |  |
| 25.    | Have you notified any governmental unit of any  | release of hazardous material?  |  |                       |  |
|        | ■ No □ Yes. Fill in the details.  |   |  |                       |  |
|        | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)                  | Environmental law, if you know it      | Date of notice        |  |
| 26.    | Have you been a party in any judicial or adminis  | trative proceeding under any envi   | ronmental law? Include settlements a   | nd orders.            |  |
|        | ■ No □ Yes. Fill in the details.  |   |  |                       |  |
|        | Case Title<br>Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)               | Nature of the case                     | Status of the case    |  |
| Par    | 11: Give Details About Your Business or Conr  | nections to Any Business  |  |                       |  |
| 27.    | Within 4 years before you filed for bankruptcy, d   | lid you own a business or have an   | y of the following connections to any  | business?             |  |
|        | ☐ A sole proprietor or self-employed in a to  | rade, profession, or other activity,  | either full-time or part-time          |                       |  |
|        | ☐ A member of a limited liability company   | (LLC) or limited liability partnersh  | ip (LLP)                               |                       |  |
| Offici | al Form 107 Statement o   | f Financial Affairs for Individuals Filing  | g for Bankruptcy                       | page                  |  |

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| Debti                | Angelo U. Crocco   |   | ase number (if known)   |
|----------------------|--|---|---|
|                      |  |   |   |
|                      | ☐ A partner in a partnership   |   |   |
|                      | ☐ An officer, director, or managing e  | xecutive of a corporation                       |   |
|                      | ☐ An owner of at least 5% of the voti  | ng or equity securities of a corporation        |   |
| I                    | No. None of the above applies. Go to   | Part 12.  |   |
| [                    | Yes. Check all that apply above and fi   | III in the details below for each business.     |   |
|                      | Business Name<br>Address   | Describe the nature of the business             | Employer Identification number Do not include Social Security number or ITIN.   |
|                      | (Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper                | Dates business existed  |
|                      | Vithin 2 years before you filed for bankrupnstitutions, creditors, or other parties.  No | otcy, did you give a financial statement to     | anyone about your business? Include all financial   |
| [                    | Yes. Fill in the details below.  |   |   |
|                      | Name<br>Address<br>(Number, Street, City, State and ZIP Code)                            | Date Issued                                     |   |
| Part                 | 12: Sign Below   |   |   |
| are trewith a 18 U.S | ue and correct. I understand that making a   |   | I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both. |
| _                    |  | Parts.  |   |
| Date                 | 4/22/2020  | Date  |   |
| Did ye ■ No □ Ye     |  | nent of Financial Affairs for Individuals Fili  | ng for Bankruptcy (Official Form 107)?  |
| Did ye               |  | ot an attorney to help you fill out bankrupt    | cy forms?   |
| _                    |  | ruptcy Petition Preparer's Notice, Declaration, | and Signature (Official Form 119).  |

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| Debtor 1           | Angelo U. Crocco         | )                      |           |                                     |
|--------------------|--------------------------|------------------------|-----------|-------------------------------------|
|                    | First Name               | Middle Name            | Last Name |                                     |
| Debtor 2           |                          |                        |           |                                     |
| Spouse if, filing) | First Name               | Middle Name            | Last Name |                                     |
| Jnited States Ba   | ankruptcy Court for the: | DISTRICT OF NEW JERSEY |           |                                     |
| ase number         |                          |                        |           |                                     |
| if known)          |                          |                        |           | ☐ Check if this is a amended filing |

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that<br>secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                                 |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement.   | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement.   | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Angelo U. Crocco |                     | Angelo U. Crocco                     | Case number (if know  | wn)                                 |
|---------------------------|---------------------|--------------------------------------|---|-------------------------------------|
|                           | name:<br>Descrip    | tion of                              | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> </ul>   | □Yes                                |
|                           | oroperty            |                                      | Retain the property and [explain]:  |                                     |
|                           | securin             |                                      | — Tetalii tile property and [explain].  |                                     |
|                           |                     | List Your Unexpired Personal Prop    |   | (000) (11)                          |
| n th                      | ne info             | rmation below. Do not list real esta | at you listed in Schedule G: Executory Contracts and Unexp<br>te leases. Unexpired leases are leases that are still in effect;<br>erty lease if the trustee does not assume it. 11 U.S.C. § 365(p | the lease period has not yet ended. |
| De                        | scribe              | your unexpired personal property l   | eases   | Will the lease be assumed?          |
|                           | ssor's n            |                                      |   | □ No                                |
|                           | scription<br>perty: | n of leased                          |   | ☐ Yes                               |
| Les                       | ssor's n            | ame:                                 |   | □ No                                |
|                           |                     | n of leased                          |   |                                     |
| Pro                       | perty:              |                                      |   | ☐ Yes                               |
| Les                       | ssor's n            | ame:                                 |   | □ No                                |
|                           |                     | n of leased                          |   | _                                   |
| Pro                       | perty:              |                                      |   | ☐ Yes                               |
|                           | ssor's n            |                                      |   | □ No                                |
|                           | scription<br>perty: | n of leased                          |   | ☐ Yes                               |
| Les                       | ssor's n            | ame:                                 |   | □ No                                |
|                           |                     | n of leased                          |   | _                                   |
| PIC                       | perty:              |                                      |   | ☐ Yes                               |
|                           | ssor's n            |                                      |   | □ No                                |
|                           | scription<br>perty: | n of leased                          |   | ☐ Yes                               |
|                           | ssor's n            |                                      |   | □ No                                |
|                           | scription<br>perty: | n of leased                          |   | ☐ Yes                               |
| Dar                       | rt 3:               | Sign Below                           |   |                                     |
| Jnd                       | ler pen             |                                      | indicated my intention about any property of my estate that   | secures a debt and any personal     |
| X                         |                     | ngelo U. Crocco                      | x   |                                     |
|                           | _                   | elo U. Crocco                        | Signature of Debtor 2   |                                     |
|                           | Signa               | ature of Debtor 1                    |   |                                     |
|                           | Data                | 4/22/2020                            | Data  |                                     |

| Fill in this infe                                  | ormation to identify your case:  |  |   |                      |                    | irected in this form and  | in Form                           |
|--|--|--|---|----------------------|--------------------|---|-----------------------------------|
| Debtor 1   | Angelo U. Crocco   |  | 12  | 2A-1Su               | pp:                |   |                                   |
| Debtor 2<br>(Spouse, if filing)                    |  |  |   | ■ 1. Ti              | nere is no presi   | umption of abuse  |                                   |
| United States                                      | s Bankruptcy Court for the:  | sey  |   | а                    | pplies will be m   | o determine if a presur<br>nade under <i>Chapter 7</i><br>icial Form 122A-2). |                                   |
| Case numbe   | ır   |  |   | _                    |                    | does not apply now be   | ecause of                         |
|  |  |  |   |                      |                    | service but it could ap   | oply later.                       |
| 000  | <b>5</b> 400 4   |  |   | ☐ Che                | eck if this is a   | n amended filing  |                                   |
|  | Form 122A - 1  |  |   |                      |                    |   |                                   |
| Chapte   | r 7 Statement of Your Cui  | rent Mor   | nthly Inc                                 | ome                  | 9                  |   | 04/20                             |
| attach a separ<br>case number (<br>qualifying mili | e and accurate as possible. If two married people ate sheet to this form. Include the line number to vif known). If you believe that you are exempted fro tary service, complete and file Statement of Exemple Calculate Your Current Monthly Income | rhich the additior<br>m a presumption<br>otion from Presur | nal information a<br>of abuse becau       | applies.<br>Ise you  | On the top of ar   | ny additional pages, wri<br>narily consumer debts o                           | te your name and<br>or because of |
| _  | s your marital and filing status? Check one or   | nly.   |   |                      |                    |   |                                   |
|  | married. Fill out Column A, lines 2-11.  |  |   |                      |                    |   |                                   |
|  | ried and your spouse is filing with you. Fill or   |  | •   | 2-11.                |                    |   |                                   |
| _  | ried and your spouse is NOT filing with you.   | _  | _   |                      |                    |   |                                   |
| _  | ving in the same household and are not lega  |  |   |                      | •                  |   |                                   |
| р  | ving separately or are legally separated. Fill<br>enalty of perjury that you and your spouse are lead to not include evading apart for reasons that do not include evading.  | egally separated   | d under nonban                            | kruptcy              | law that applie    | es or that you and you  |                                   |
| 101(10A). F<br>the 6 month                         | everage monthly income that you received from all for example, if you are filing on September 15, the 6-m is, add the income for all 6 months and divide the tota on the same rental property, put the income from that property.                    | onth period would<br>by 6. Fill in the re                  | l be March 1 thros<br>sult. Do not includ | ugh Aug<br>de any ir | ust 31. If the amo | ount of your monthly incomore than once. For examp                            | ne varied during<br>ble, if both  |
|  |  |  |   | Colum                |                    | Column B Debtor 2 or non-filing spouse  |                                   |
| _  | ross wages, salary, tips, bonuses, overtime, deductions).  | and commission   | ons (before all                           | \$                   | 2,272.59           | \$  |                                   |
|  | y and maintenance payments. Do not include<br>B is filled in.  | payments from  | a spouse if                               | \$                   | 0.00               | \$  |                                   |
| of you<br>from an<br>and roo                       | ounts from any source which are regularly proor your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a sp  | Include regular<br>I, your depende                         | contributions nts, parents,               | \$                   | 0.00               | \$  |                                   |
|  | Do not include payments you listed on line 3. ome from operating a business, profession,   | or farm  |   | Ψ                    |                    | Ψ   |                                   |
| o. Net mo  | ome from operating a basiness, profession,   |  | otor 1                                    |                      |                    |   |                                   |
| Gross r  | eceipts (before all deductions)  | \$0.00   |   |                      |                    |   |                                   |
| Ordinar  | y and necessary operating expenses   | -\$0.00  |   |                      |                    |   |                                   |
| Net mo   | nthly income from a business, profession, or far   | m \$0.00   | Copy here ->                              | \$                   | 0.00               | \$  |                                   |
| 6. Net inc   | ome from rental and other real property  | Dob  | otor 1                                    |                      |                    |   |                                   |
| C****  | oppints (hafara all dodustions)  | \$ 0.00  | NOI I                                     |                      |                    |   |                                   |
|  | eceipts (before all deductions) y and necessary operating expenses   | -\$ 0.00   |   |                      |                    |   |                                   |
|  | nthly income from rental or other real property  | ·  | Copy here ->                              | \$                   | 0.00               | \$  |                                   |
|  | t, dividends, and royalties  | *  | -   | \$                   | 0.00               | \$  |                                   |
|  |  |  |   |                      |                    |   |                                   |

Official Form 122A-1

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Angelo U. Crocco Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,272.59 2,272.59 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 2,272.59 Multiply by 12 (the number of months in a year) **x** 12 27,271.08 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 69,705.00 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Angelo U. Crocco

Angelo U. Crocco
Official Form 122A-1

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| Debtor 1 | Angelo U. Crocco  | Case number (if known) |  |
|----------|---|------------------------|--|
|          | Signature of Debtor 1   |                        |  |
| Da       | ate 4/22/2020<br>MM / DD / YYYY   |                        |  |
|          | If you checked line 14a, do NOT fill out or file Form 122A-2.           |                        |  |
|          | If you checked line 14b, fill out Form 122A-2 and file it with this for | m.                     |  |

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Debtor 1 Angelo U. Crocco Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2019 to 03/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Burlington Coat Factory

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\frac{\\$0.00}{\$4,526.47}\$ from check dated \$\frac{\\$9/30/2019}{\$1/207/2019}\$.

Ending Year-to-Date Income: \$\frac{\\$4,526.47}{\$1/207/2019}\$ from check dated \$\frac{\\$1/207/2019}{\$1/207/2019}\$.

This Year:

Current Year-to-Date Income: \$6,449.17 from check dated 3/31/2020 .

Income for six-month period (Current+(Ending-Starting)): \$10,975.64 .

Average Monthly Income: \$1,829.27.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Target

Income by Month:

| 6 Months Ago: | 10/2019            | \$1,948.83 |
|---------------|--------------------|------------|
| 5 Months Ago: | 11/2019            | \$711.10   |
| 4 Months Ago: | 12/2019            | \$0.00     |
| 3 Months Ago: | 01/2020            | \$0.00     |
| 2 Months Ago: | 02/2020            | \$0.00     |
| Last Month:   | 03/2020            | \$0.00     |
|               | Average per month: | \$443.32   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte   | er 7: | Liquidation        |
|----------|-------|--------------------|
|          | \$245 | filing fee         |
|          | \$75  | administrative fee |
| <u>+</u> | \$15  | trustee surcharge  |
|          | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing tee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 20-15787-CMG Doc 1 Filed 04/23/20 Entered 04/23/20 13:39:21 Desc Main Document Page 51 of 54

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**District of New Jersey

| In re  | Angelo U. Crocco   |   | Case No.               |  |                  |  |  |
|--------|--|---|------------------------|--|------------------|--|--|
|        |  | Debtor(s)   | Chapter                | 7  |                  |  |  |
|        | DISCLOSURE OF COMPENSA   | TION OF ATTOR   | NEY FOR DE             | CBTOR(S)                                       |                  |  |  |
| C      | rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that mpensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |   |                        |  |                  |  |  |
|        | For legal services, I have agreed to accept  |   | \$                     | 1,700.00                                       |                  |  |  |
|        | Prior to the filing of this statement I have received  |   | \$                     | 1,700.00                                       |                  |  |  |
|        | Balance Due  |   | \$                     | 0.00   |                  |  |  |
| 2.     | The source of the compensation paid to me was:   |   |                        |  |                  |  |  |
|        | ■ Debtor □ Other (specify):  |   |                        |  |                  |  |  |
| 3.     | The source of compensation to be paid to me is:  |   |                        |  |                  |  |  |
|        | ■ Debtor □ Other (specify):  |   |                        |  |                  |  |  |
| 4.     | ■ I have not agreed to share the above-disclosed compensation  | on with any other person ur                                 | aless they are members | pers and associates of my                      | y law firm.      |  |  |
|        | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of  |   |                        |  | firm. A          |  |  |
| 5.     | In return for the above-disclosed fee, I have agreed to render le  | egal service for all aspects of                             | of the bankruptcy c    | ase, including:                                |                  |  |  |
| t<br>c | a. Analysis of the debtor's financial situation, and rendering ac<br>b. Preparation and filing of any petition, schedules, statement<br>c. Representation of the debtor at the meeting of creditors and<br>d. [Other provisions as needed]   | of affairs and plan which m                                 | nay be required;       |  | tcy;             |  |  |
| 6. I   | By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any discharg any other motions or adversary proceeding, post-Meeting of Creditors proceedings.  | geability actions, judici                                   | al lien avoidance      | es, relief from stay ac<br>on agreements and a | ctions or<br>any |  |  |
|        | CEI  | RTIFICATION   |                        |  |                  |  |  |
|        | I certify that the foregoing is a complete statement of any agree ankruptcy proceeding.  | ement or arrangement for pa                                 | ayment to me for re    | epresentation of the debte                     | or(s) in         |  |  |
| 4      | 1/22/2020  | /s/ Warren Brumel,  | Esa.                   |  |                  |  |  |
|        | ate  | Warren Brumel, Es<br>Signature of Attorney<br>Warren Brumel |                        |  | _                |  |  |
|        |  | 65 Main Street  |                        |  |                  |  |  |
|        |  | PO Box 181<br>Keyport, NJ 07735                             |                        |  |                  |  |  |
|        |  | 732-264-3400 Fax:   |                        |  |                  |  |  |
|        |  | wbrumel@keyportl Name of law firm                           | aw.com                 |  | -                |  |  |
|        |  |   |                        |  |                  |  |  |

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## **United States Bankruptcy Court**District of New Jersey

| District of New Jersey   |                  |                      |          |   |  |  |  |  |  |
|--|------------------|----------------------|----------|---|--|--|--|--|--|
| In re  | Angelo U. Crocco |                      | Case No. |   |  |  |  |  |  |
|  |                  | Debtor(s)            | Chapter  | 7 |  |  |  |  |  |
| VERIFICATION OF CREDITOR MATRIX  |                  |                      |          |   |  |  |  |  |  |
| The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge. |                  |                      |          |   |  |  |  |  |  |
| Date:  | 4/22/2020        | /s/ Angelo U. Crocco |          |   |  |  |  |  |  |
|  |                  | Angelo U. Crocco     |          |   |  |  |  |  |  |

Signature of Debtor

American Honda Finance Corp 201 Little Falls Drive Wilmington, DE 19808

Bayshore Community Hospital 727 N Beers Street Holmdel, NJ 07733

Bloomingdale's P.O. Box 8066 Mason, OH 45040

Capital One Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285

Celentano, Stadtmauer & Walentowicz, LLP PO Box 2594 Clifton, NJ 07015-2594

Hayt, Hayt & Landau Two Industrial Way West Eatontown, NJ 07724-0500

LVNV Funding LLC Att: Stenger & Stenger, PC 2618 East Paris Avenue SE Grand Rapids, MI 49546

Macy's Att: Bankruptcy Dept. PO Box 8053 Mason, OH 45040

Merrick Bank Cardworks Servicing PO Box 9201 Old Bethpage, NY 11804

Midland Funding Att: Pressler, Felt & Warshaw, LLP 7 Entin Road Parsippany, NJ 07054-5020 Midland Funding LLC Att: Pressler, Felt & Warshaw, LLP 7 Entin Road Parsippany, NJ 07054-5020

Navient PO Box 9635 Wilkes-Barre, PA 18773

Portfolio Recovery Associates 140 Corporate Blvd. Norfolk, VA 23502

Progressive Auto Insurance Att: Credit Collect Service PO Box 607 Norwood, MA 02062

Sprint
Att: Enhanced Recovery Co. LLC
8014 Bayberry Road
Jacksonville, FL 32256

Synergetic Communication, Inc. 5450 N.W. Central #220 Houston, TX 77092-2016

T-Mobile Att: Convergent PO Box 9004 Renton, WA 98057

Target
PO Box 1581
Minneapolis, MN 55440-1581

Verizon Wireless Att: Jefferson Capital Systems 16 McLeland Road Saint Cloud, MN 56303

Victoria's Secret Att: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125